



**Georgia Department of Community Service**  
**Contracts Administration**  
**2 Peachtree Street, NW, 35<sup>th</sup> Floor**  
**Atlanta, Georgia 30303-1519**  
**Phone Number: 404-651-9023**  
**Fax Number: 404-656-4988**

**Request for Proposal Number:** 419-03-00392  
**Addendum Number:** 02 **Dated:** April 12, 2004  
**Commodity or Service:** Services Expansion of Rural-Based Federally  
Qualified Health Center – Hypertension Disease

RFP Initially Mailed/Posted to Internet: March 31, 2004  
Purchasing Agent: Trudie E. Carmichael Telephone No. (404) 651-9023  
RFP Due Date: April 23, 2004 Time: 1:00:00 PM EDT

**The attached information is made a part of this RFP. The purpose of this addendum is to provide the following:**

**Please see “Questions and Answers” attached.**

**All other items remain the same.**

**NOTE PLEASE REVIEW CAREFULLY!**

In the event of a conflict between previously released information and the information contained herein, the latter shall control.

**NOTE: A signed acknowledgment of this addendum (this page) should be attached to your RFP response. A signature on this addendum does not constitute your signature on the original RFP document. The original RFP response must also be signed in the proper places.**

\_\_\_\_\_  
Firm Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Typed Name and Title

\_\_\_\_\_  
Date

**ADDENDUM #2**

**APPENDIX I**

**FORM FOR SUBMITTING WRITTEN QUESTIONS**

<b>Written Questions for RFP No.</b>	<b>419-03-00392</b>
<b>RFP Title</b>	<b>Services Expansion – Chronic Hypertension</b>
<b>Date:</b>	<b>April 12, 2004</b>
<b>Deadline for written questions</b>	<b>April 8, 2004, 2:00 pm</b>

	Question	Answer (leave blank)
1	Can the Georgia Association for Primary Health Care serve as the grantee for this announcement? The Association would submit on behalf of a group of urban and rural CHCs for each of the RFPs.	No. The RFP was structured for responses from the individual Community Health Centers.
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